

# Demographic Reporting Form

## Individual – Quarterly Totals

Positive Alternatives

Dates: 1/1/2017 - 3/31/17 Grantee Name: Morris Life Care Pregnancy Center

### 1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
0	1	3	1	2	2	1	0

### 2. Client Pregnancy Status:

- 2 negative pregnancy tests

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown	Other (Father or Grandparent)
2	2	2	1	0	1

### 3. Client Marital Status:

Married	Not Married	Marital Status Unknown
4	6	0

### 4. Client Race:

Race: White	Race: African American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
9	0	0	1	0	0	0

### 5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
3	7	0

### 6. Client Type:

Mother	Father	Grandparent	Other
7	1	0	2